07/31/2009 11:51

Image# 29992554750

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

		-or O	tner I nan An	Authorize	ea Comm	ittee		Office Us	e Only	
1.			EC MAILING LAE		kample:If typi er the lines	ing, type				
L	American Hospital Association	n PAC					1 1 1		1 1 1	
Ш		1 1								
A <u>D</u>	DRESS (number and street)	325	Seventh Street, N	W		1 1 1 1	1 1 1	1 1 1 1	1 1 1	
_		Suit	te 700							1
L	Check if different than previously reported. (ACC)	Was	shington				DC	20	0004	
2.	FEC IDENTIFICATION NUM	BER	~	CITY 🛕			STATE		ZIPCODE	A
	C00106146			3. IS THIS REPOR	г	NEW (N) OR	X	AMENDED (A)		
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Q1)		Monthly Report Due On:	Feb 20 (M2 Mar 20 (M3 Apr 20 (M4	X X	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Ä	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) neral (12G)		Nov 20 (M11) Non-Election Year Only) Oec 20 (M12) Non-Election Year Only) Ian 31 (YE)
	July 15 Quarterly Report(Q2 October 15 Quarterly Report(Q3 January 31 Quarterly Report(YE	3)	PRE-Electic Report for the		Conventio		=	ecial (12G)	in the State of	TUIIOII (12H)
	July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER)	1	(d) 30-Day Post -Elect Report for the		General (3	80G)	Rur	noff (30R)		Special (30S)
5.	Covering Period 0.5		01 200	9	througl	h 0.5	3 1	2009		
	ertify that I have examined this R		and to the best of n s. Melinda Hatton	ny knowledge	and belief it	t is true, correct	and com	olete.		
Sig	nature of Treasurer Electron	ically F	Filed by Ms. Meli	nda Hatton			Date	07 31	2	009
NO	TE : Submission of false, erron	eous, c	or incomplete infor	mation may s	ubject the pe	erson signing th	nis Report	to the penalties	of 2 U.S.C	C 437g.
	Office Use							l l	FORM	

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 56 FEC Form 3X (Rev. 02/2003)

American Hospital Asso		С					
Report Covering the Period:	From:	M M 0 5	0 1	2009	To:	0 5 3 1	2009

-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1 2009 Y Y Y		1339674.06
(b) Cash on Hand at Begining of Reporting Period	1351489.93	
(c) Total Receipts (from Line 19)	112186.26	478670.28
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1463676.19	1818344.34
Total Disbursements (from Line 31)	52207.02	406875.17
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1411469.17	1411469.17
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

3 / 56 FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

м м 0 5

From:

D D 0 1

2009

м м 0 5

^D 3 1

2 0 0 9

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	30992.96	155344.42
	(ii) Unitemized	8011.07	47545.89
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	39004.03	202890.31
(t	o) Political Party Committees	0.00	0.00
(c	(such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	39004.03	202890.31
	ransfers From Affiliated/Other arty Committees	53000.00	253100.00
3. A	Il Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(C	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other colitical Committees	20000.00	21000.00
	Other Federal Receipts Dividends, Interest, etc.)	182.23	1679.97
	ransfers from Non-Federal and Levin Funds		
(a	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b	b) Levin Funds (from Schedule H5)	0.00	0.00
(C	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	112186.26	478670.28
	otal Federal Receipts ubtract Line 18(c) from Line 19)	112186.26	478670.28

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 56

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	007.00	000F 47
	Expenditures	607.02	3925.17
	(c) Total Operating Expenditures	607.02	3925.17
,	(add 21(a)(i), (a)(ii) and (b))	607.02	3923.17
۷.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	51600.00	402950.00
	Independent Expenditure		
	(use Schedule E)	0.00	0.00
	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
	Loan Repayments Made	0.00	0.00
,	Lana Mada	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
•	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
).	Other Disbursements	0.00	0.00
	_		
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	52207.02	406875.17
	_		
	Total Federal Disbursements		
2.			
2.	(subtract Line 21(a)(ii) and Line 30(a)(ii)	52207.02	406875.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 56

TEO TOTAL (TIEV. 02/2000)		
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Fotal Contributions (other than loans) from Line 11(d), page 3)	39004.03	202890.31
Fotal Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	39004.03	202890.31
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	607.02	3925.17
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	607.02	3925.17

FE6AN026

ITEMIZED REC		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 56 (check only one) 11a 11b 11c X 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purp NAME OF COMMI	oses, other than using the name and	d address of any political committee to	o solicit contributions from such committee.
Mailing Address	rst, Middle Initial) Association PAC - Federal 1215 K Street Suite 800		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	'	Transaction ID: 17083616
Sacramento FEC ID number of of federal political com		95814 C00237495	Amount of Each Receipt this Period 25000.00
Name of Employer	Occup	pation	
Receipt For: Primary Other (specify	General	gate Year-to-Date ▼ 100000.00	
Full Name (Last, Find Health Alliance of PA) Mailing Address			Date of Receipt 0 5 0 8 2 0 0 9
City	State	e Zip Code	Transaction ID: 17195368
<u>Harrisburg</u>	PA	17105-8600	Amount of Each Receipt this Period
FEC ID number of of federal political com		C00128082	10000.00
Name of Employer	Оссир	oation	
Receipt For: Primary Other (specify	General	gate Year-to-Date ▼ 20000.00	
Full Name (Last, Fin Texas Hospital Association	rst, Middle Initial) ciation HOSPAC - Federal		Date of Receipt
Mailing Address [05 / 27 / 2009
City	State TX	'	Transaction ID: 17220875
Austin FEC ID number of of federal political com	contributing	78761-5587 C00301325	Amount of Each Receipt this Period 18000.00
Name of Employer	Оссир	pation	
Receipt For: Primary Other (specify	General	egate Year-to-Date ▼ 18000.00	
SUBTOTAL of Recei	ots This Page (optional)		53000.00
	ast page this line number only)		53000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	rnot be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Mr. Kevin M. Pitzer Mailing Address 4187 Houkom Court City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Fargo FEC ID number of contributing	ND C	58104-6002	Amount of Each Receipt this Period 500.00
	Name of Employer Innovis Health Receipt For: Primary General Other (specify)	Occupation Chief Ope	erating Officer Year-to-Date 500.00	
3.	Full Name (Last, First, Middle Initial) Mr. James R. Castle Mailing Address 815 Gatehouse Lane			Date of Receipt 0 5 0 4 2 0 0 9
	City	State	Zip Code	Transaction ID: 17178571
	Columbus FEC ID number of contributing federal political committee.	C	43235-1733	Amount of Each Receipt this Period 500.00
	Name of Employer Ohio Hospital Association	Occupation President	: & Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
- :.	Full Name (Last, First, Middle Initial) Dr. David Engler, PhD Mailing Address 323 Pebble Creek Drive	e		Date of Receipt
	City	State	Zip Code	0 5 0 4 2 0 0 9 Transaction ID: 17178573
	<u>Dublin</u>	OH	43017-1370	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Ohio Hospital Association	Occupation Sr. Dir. D	n ata Services & V.P. REF	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. George Massar Mailing Address 820 Abingdon Lane City Bowling Green FEC ID number of contributing federal political committee. Name of Employer Wood County Hospital Receipt For:	State Zip Code OH 43402-8517 C Occupation Vice President, Operations Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	262.50	
Ms. Cindy R Turner Mailing Address P O Drawer 1987 City Alma FEC ID number of contributing federal political committee. Name of Employer Bacon County Hospital and Health Syste Receipt For: Primary General Other (specify)	State Zip Code GA 31510-1987 C Occupation Chief Executive Officer Aggregate Year-to-Date 300.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Kurt Stuenkel, , FACHE Mailing Address P O Box 233 City Rome FEC ID number of contributing federal political committee. Name of Employer Floyd Medical Center Receipt For: Primary General Other (specify)	State Zip Code GA 30162-0233 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	812.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Lamar Lyle		Date of Receipt
Mailing Address Post Office Box 44		05 05 2009
City	State Zip Code	Transaction ID: 17184665
<u>Dalton</u>	GA 30722-0044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hamilton Medical Center	Occupation Board Chairman	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Don Faulk, , Jr., FAC		Date of Receipt
Mailing Address P O Box 6000		05 05 2009
City	State Zip Code	Transaction ID: 17184666
Macon	GA 31208-6000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Medical Center of Central Georgia	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary ☐ General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Matt Crouch	.1	Date of Receipt
Mailing Address 2151 Peachford Road	d	05 / 05 / 2009
City	State Zip Code	Transaction ID: 17184695
Atlanta	GA 30338-6534	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Peachford Behavioral Heal- th System	Occupation Chief Executive Officer and Managing	1 Þ
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUPTOTAL of Descripts This Descripts (satisfied)		1250.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purp	oses, other than using the na	ements may	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, Fi Ms. Holly B Snow Mailing Address	rst, Middle Initial) 2001 Peachtree Rd NE, 4	400		Date of Receipt
City <u>Atlanta</u>		State GA	Zip Code 30309-1476	0 5 0 5 2 0 0 9 Transaction ID: 17184696 Amount of Each Receipt this Period
FEC ID number of federal political com	ımittee.	Coupation		250.00
Name of Employer Piedmont Healthca Receipt For: Primary Other (specification)	General		ident Government and Exter Year-to-Date ▼ 250.00	nal
Full Name (Last, Fi Mr. Gerald N Fulks Mailing Address	rst, Middle Initial)			Date of Receipt 0 5 0 5 2 0 0 9
City		State	Zip Code	Transaction ID: 17184700
Lagrange		GA	30240-4131	Amount of Each Receipt this Period
FEC ID number of federal political com		С		250.00
Name of Employer West Georgia Heal	th System		and Chief Executive Officer	
Receipt For: Primary Other (specify	General /) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, Fi	·			Date of Receipt
	6015 Poplar Hall Drive Suite 102			05 06 2009
City		State VA	Zip Code	Transaction ID: 17185315
Norfolk FEC ID number of federal political con		C	23502-3819	Amount of Each Receipt this Period 200.00
Name of Employer Sentara Healthcare		Occupation Senior Vi	n ce President, Systems Deve	lop
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Recei	ots This Page (optional)			700.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG		
Full Name (Last, First, Middle Initial) Mr. R. Edward Howell		Date of Receipt
Mailing Address P O Box 800809 City	State Zip Code	0 5 0 6 2 0 0 9 Transaction ID: 17185318
Charlottesville	VA 22908-0809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer University of Virginia Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Vice President and Chief Executive Of Aggregate Year-to-Date 350.00	- f_
Full Name (Last, First, Middle Initial) Mr. Kenneth M. Krakaur Mailing Address 108 Burwell Court	-	Date of Receipt
		05 06 2009
City	State Zip Code	Transaction ID: 17185320
Williamsburg	VA 23185-6507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Sentara Healthcare	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Joseph P Coyle		Date of Receipt
Mailing Address 46 Cypress Lane		05 08 2009
City	State Zip Code	Transaction ID: 17188385
Cedar Run FEC ID number of contributing federal political committee.	NJ 08092-2839	Amount of Each Receipt this Period 500.00
Name of Employer Southern Ocean County Hos-	Occupation President and Chief Executive Officer	_
pital Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional		1050.00
	ber only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to s	
NAME OF COMMITTEE (In Full) American Hospital Association PAC)	
Full Name (Last, First, Middle Initial) Mr. Joseph M. Letnaunchyn		Date of Receipt
Mailing Address 225 Ariel Heights	71.0	05 07 2009
Charleston	State Zip Code	Transaction ID: 17188455
Charleston FEC ID number of contributing federal political committee.	WV 25311-1143	Amount of Each Receipt this Period 500.00
Name of Employer West Virginia Hospital As-	Occupation	
sociation Receipt For:	President & CEO Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ¥	
Full Name (Last, First, Middle Initial) Mr. J. Thomas Jones		Date of Receipt
Mailing Address 3106 N. Greystone	05 / 07 / 4 2009	
City	State Zip Code	Transaction ID: 17188456
Morgantown	WV 26508-8601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer West Virginia United Heal- th System	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ann Hauerland		Date of Receipt
Mailing Address 138 Shore Crest Dr	ve	05 07 YYYY 2009
City	State Zip Code	Transaction ID: 17189054
<u>Martin</u>	GA 30557-2062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Stephens County Hospital	Occupation Director, Volunteer Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
CURTOTAL of Descipts This Dags (antique)	1350.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 56 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may not be sold or used by any personant the name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael V Gentry		Date of Receipt
Mailing Address 1328 Murray Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17197670
Chesapeake	VA 23322-1834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Healthcare	Occupation Corporate Vice President	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mark Gordon		Date of Receipt
Mailing Address 207 N Allen Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17197672
Richmond	VA 23220-3501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Don Halliwill		Date of Receipt
Mailing Address P O Box 5		05 12 YYYY 2009
City	State Zip Code	Transaction ID: 17197697
Radford	VA 24143-0005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Carilion New River Valley Medical Cent	Occupation President/ Hospital Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
		900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any p name and address of any political committe	erson for the purpose of soliciting contributions are to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Mark Szalwinski		Date of Receipt
Mailing Address 104 Watch Harbour Ci	rcle	05 12 2009
City	State Zip Code	Transaction ID: 17197713
Smithfield	VA 23430-2326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Healthcare	Occupation Director of Pharmacy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) F Dixon Whitworth		Date of Receipt
Mailing Address		05 12 2009
City	State Zip Code	Transaction ID: 17197714
Winchester	VA 22601-4130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Community Memorial Health- center	Occupation Board Chairman	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Kathy J Bobbs		Date of Receipt
Mailing Address 109 East Peck Blvd		05 12 2009
City	State Zip Code	Transaction ID: 17197717
Lafayette	LA 70508-7473	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Women's and Children's Ho- spital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	I	1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/56 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Theresa J. Rogers			Date of Receipt
Mailing Address 2644 Jennifer Drive	05 13 2009		
City Jefferson City	State MO	Zip Code 65101-3997	Transaction ID: 17200364 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03101-3397	350.00
Name of Employer Missouri Hospital Associa- tion	Occupatio Senior V	n ice President, Data & Inform	at
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Russell G Keene			Date of Receipt
Mailing Address 59 Page Hill Road			05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NH	Zip Code	Transaction ID: 17200365
Berlin FEC ID number of contributing federal political committee.	C	03570-3542	Amount of Each Receipt this Period 350.00
Name of Employer Androscoggin Valley Hospi-	Occupatio Chief Exc	n ecutive Officer	
tal Receipt For: Primary General		e Year-to-Date ▼	
Other (specify)		350.00	
Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen			Date of Receipt
Mailing Address 125 Airport Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NH	Zip Code	Transaction ID: 17200366
Concord FEC ID number of contributing federal political committee.	С	03301-7300	Amount of Each Receipt this Period
Name of Employer New Hampshire Hospital As- sociation	'	t and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
			1700.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 56 (check only one) X
Any inform or for com	nation copied from such Reports and S mercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	OF COMMITTEE (In Full)			
	ume (Last, First, Middle Initial) thy A. Bizarro, FACHE			Date of Receipt
	Address 544 Upper Straw Rd			05 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 17200367
<u>Hopki</u>	nton	NH	03229-2023	Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Name o New H sociatio	of Employer ampshire Hospital As-	Occupatio Executive	n e Vice President	
Receip		Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	ume (Last, First, Middle Initial) vid W Tower, , FACHE	<u> </u>		Date of Receipt
	Address P O Box 912			05 15 2009
City		State	Zip Code	Transaction ID: 17200368
<u>Wolfe</u>	boro	NH	03894-0912	Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Name o Huggin	of Employer ns Hospital	Occupatio Presiden		
Receip	t For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ♥		500.00	
	ume (Last, First, Middle Initial)	1		Date of Receipt
Mailing	Address 273 County Road			05 15 2009
City		State	Zip Code	Transaction ID: 17200369
New L	_ondon	NH	03257-5736	Amount of Each Receipt this Period
	number of contributing political committee.	C		350.00
Name of New Lo	of Employer ondon Hospital	Occupatio Presiden	n t and Chief Executive Officer	r
Receip		Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		350.00	
	AL of Receipts This Page (optional)	<u> </u>		1350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports a	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert V Stanek		Date of Receipt
Mailing Address 3805 West Chester	r Pike	05 21 2009
City	State Zip Code	Transaction ID: 17213475
Newtown Square	PA 19073-2304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Catholic Health East	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Nancy A. Crawford		Date of Receipt
Mailing Address 1616 Lobdell Aven	ue	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17217496
Baton Rouge	LA 70806-8246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Woman's Hospital	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Sandra Elza		Date of Receipt
Mailing Address 201 Hampton Lane	9	05 21 2009
City	State Zip Code	Transaction ID: 17217497
Ripley	WV 25271-9661	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson General Hospital	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option:	al)	1600.00

SCHEDULE A (FE ITEMIZED RECEIF	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from or for commercial purposes, NAME OF COMMITTEE American Hospital As	other than using the name and a (In Full)	nay not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mi Mr. Dwight L. Fine	State MO uting Occupat Sr. Vice	Zip Code 65043-2039 ion e President, Health Policy ate Year-to-Date ▼	Date of Receipt M M M
Other (specify) ▼ Full Name (Last, First, Minder D. Smith	eneral ddle Initial) Tanner Bridge Road	262.50	Date of Receipt
City Jefferson City FEC ID number of contrib federal political committee		Zip Code 65101-8275	Transaction ID: 17217513 Amount of Each Receipt this Period 125.00
Name of Employer Missouri Hospital Association Receipt For: Primary Other (specify) ▼	Freside	ent and Chief Executive Office ate Year-to-Date ▼ 375.00	er .
Full Name (Last, First, Mi Mr. Don Adams Mailing Address 419 N	ddle Initial) atural Resources Drive		Date of Receipt 05 22 2009
City <u>Little Rock</u> FEC ID number of contrib federal political committee		Zip Code 72205-1576	Transaction ID: 17217517 Amount of Each Receipt this Period 500.00
Name of Employer Arkansas Hospital Assoction Receipt For: Primary Other (specify)	Vice Pr	ion resident ate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts Th	is Page (optional)		712.50

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 56 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
∠ 4.	Full Name (Last, First, Middle Initial) Mr. Robert P. Atkinson, , FACHE		Date of Receipt
	Mailing Address 1600 West 40th Avenu		05 22 7 2009
	City Pine Bluff	State Zip Code AR 71603-7089	Transaction ID: 17217518
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 350.00
	Name of Employer Jefferson Regional Medical Center	Occupation President and Chief Executive Officer	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Paul Cunningham	Date of Receipt	
	Mailing Address 419 Natural Resources	05 22 2009	
	City	Transaction ID: 17217519	
	Little Rock FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 500.00
	Name of Employer Arkansas Hospital Associa- tion	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00]
—).	Full Name (Last, First, Middle Initial) Mr. Timothy E Hill		Date of Receipt
	Mailing Address 620 N. Willow		05 22 7 2009
	City	State Zip Code	Transaction ID: 17217520
	Harrison FEC ID number of contributing federal political committee.	AR 72601-2994	Amount of Each Receipt this Period 500.00
	Name of Employer North Arkansas Regional Medical Center	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		ı	1350.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
A.	Full Name (Last, First, Middle Initial) Ms. Beth Ingram	Date of Receipt	
	Mailing Address 419 Natural Resources	05 22 2009	
	City Little Rock	State Zip Code AR 72205-1576	Transaction ID: 17217521 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 500.00	
ь В.	Full Name (Last, First, Middle Initial) Mr. Phil E. Matthews Mailing Address 419 Natural Resources	Date of Receipt	
	City	0 5 2 2 2 0 0 9 Transaction ID: 17217522	
	Little Rock	AR 72205-1576	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Arkansas Hospital Associa- tion	Occupation President & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
C.	Full Name (Last, First, Middle Initial) Mr. Raymond W Montgomery, II, FACHE	<u> </u>	Date of Receipt
	Mailing Address 3214 East Race Avenu	05 22 YYYY 2009	
	City Searcy	State Zip Code AR 72143-4810	Transaction ID: 17217523
	FEC ID number of contributing federal political committee.	C 72143-4610	Amount of Each Receipt this Period 500.00
	Name of Employer White County Medical Cent-	Occupation President and Chief Executive Officer	7
	er Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		2000.00
	TOTAL This Period (last page this line number	only)	

NAME OF COMMITTEE (in Full) Name (Last, First, Middle Initial) Name of Employer Name	I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and Si	Use separate schedule(s) for each category of the Detailed Summary Page atements may not be sold or used by any pe	FOR LINE NUMBER: PAGE 21 / 56 (check only one) X	
A. Mr. Bo Ryall Mailing Address 419 Natural Resources Drive City State Zip Code AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association. Receipt Weeks, FACHE Mailing Address 9601 Interstate 630 Exit 7 City State Zip Code AR 72205-1576 Date of Receipt this Period Transaction ID: 17217524 Amount of Each Receipt this Period 1000.00 Date of Receipt Amount of Each Receipt this Period 1000.00 Date of Receipt Amount of Each Receipt this Period 1000.00 Date of Receipt 1000.00 Da		NAME OF COMMITTEE (In Full)	name and address of any political committee	e to solicit contributions from such committee.	
City State Zip Code Little Rock AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼	∠ A .	Mr. Bo Ryall		Date of Receipt	
City State Zip Code AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Beceipt For: Primary General General		Mailing Address 419 Natural Resources	Drive	05 22 2009	
FEC ID number of contributing tederal political committee. Name of Employer Arkansas Hospital Association. B. Full Name (Last, First, Middle Initial) Mr. Douglas Weeks., FACHE Mailing Address 9601 Interstate 630 Exit 7 City State Zip Code AR 72205-7299 FEC ID number of contributing tederal political committee. Name of Employer Baptist Health Medical Center-Little Receipt For: Primary General Other (specify) ▼ Date of Receipt No.		City	State Zip Code		
South Second S		Little Rock	AR 72205-1576	Amount of Each Receipt this Period	
Date of Receipt South S			C	1000.00	
Receipt For: Primary General Dither (specify) ▼ 1000.00			•		
Mailing Address 9601 Interstate 630 Exit 7 City State Zip Code Little Rock AR 72205-7299 FEC ID number of contributing federal political committee. Name of Employer State Size AR 72205-1576 FUIl Name (Last, First, Middle Initial) Ms. Elisa M. White Mailing Address 419 Natural Resources Drive City State Zip Code AR 72205-7299 Full Name (Last, First, Middle Initial) Ms. Elisa M. White Mailing Address 419 Natural Resources Drive City State Zip Code AR 72205-1576 FEC ID number of contributing federal political committee. City State Zip Code AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Vice President & General Counsel Aggregate Year-to-Date ▼ Occupation Vice President & General Counsel Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Date of Receipt M M M M M M M M M M M M M M M M M M M		Primary General	1000.00		
City State Zip Code AR 72205-7299 FEC ID number of contributing federal political committee. C	- В.	Mr. Douglas Weeks, , FACHE	M M / D D / Y Y Y Y		
Little Rock AR 72205-7299 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C		City	City State Zip Code		
FEC ID number of contributing federal political committee. Name of Employer Baptist Health Medical Center-Little R Receipt For: Primary General Other (specify) ▼		•	•		
Baptist Health Medical Center-Little R Receipt For: Primary			C		
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Elisa M. White Mailing Address 419 Natural Resources Drive City State Zip Code Little Rock AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Baptist Health Medical Ce- nter-Little R	·		
Ms. Elisa M. White Mailing Address 419 Natural Resources Drive City State Zip Code Little Rock AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Occupation Vice President & General Counsel Aggregate Year-to-Date ▼ 500.00		Primary General			
City Little Rock FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼ State Zip Code AR 72205-1576 Transaction ID: 17217526 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date ▼ 500.00	-).	,		Date of Receipt	
City State Zip Code Little Rock AR 72205-1576 FEC ID number of contributing federal political committee. C State Zip Code AR 72205-1576 Amount of Each Receipt this Period 500.00 C State Zip Code AR 72205-1576 Amount of Each Receipt this Period C State Zip Code AR 72205-1576 Amount of Each Receipt this Period 500.00		Mailing Address 419 Natural Resources	Drive		
Little Rock AR 72205-1576 FEC ID number of contributing federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 500.00 Amount of Each Receipt this Period 500.00		City	State Zip Code		
Name of Employer Arkansas Hospital Association Receipt For: Primary Other (specify) ▼ Occupation Vice President & General Counsel Aggregate Year-to-Date ▼ 500.00		Little Rock	AR 72205-1576		
Arkansas Hóspital Association Receipt For: Primary Other (specify) ▼ Vice President & General Counsel Aggregate Year-to-Date ▼ 500.00			C	500.00	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		tion	I		
SUBTOTAL of Receipts This Page (optional)		Receipt For: Primary General			
		SUBTOTAL of Receipts This Page (optional)		2000.00	

SCHEDULE A (FEC Fo	rm 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 56 (check only one)	
ITEMIZED RECEIPTS	I	for each category of the Detailed Summary Page	X 11a	
Any information copied from such R or for commercial purposes, other th	eports and Statements may no an using the name and addres	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full American Hospital Associated)	,			
Full Name (Last, First, Middle Ini	tial)		Date of Receipt	
<u> </u>	Mr. Lawrence J Massa Mailing Address 2550 University Avenue W.			
City	State	Zip Code	0 5 2 2 2 0 0 9 Transaction ID: 17217547	
Saint Paul	MN	55114-1052	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		200.00	
Name of Employer Minnesota Hospital Associ- ation	Occupation President			
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 400.00		
Full Name (Last, First, Middle Ini Ms. Karen L Bowling	Full Name (Last, First, Middle Initial)			
	Mailing Address 127 Orlando Street			
City	State	Zip Code	Transaction ID: 17220137	
Beckley	WV	25801-8792	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		500.00	
Name of Employer Raleigh General Hospital	Occupation Chief Execu	itive Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00		
Full Name (Last, First, Middle Ini Ms. Debra A Flores	tial)		Date of Receipt	
Mailing Address 3326 River	Bend Pl		05 21 YYYYY 2009	
City	State	Zip Code	Transaction ID: 17220151	
Suffolk	VA	23435-3426	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		350.00	
Name of Employer Sentara CarePlex Hospital	Occupation Vice Presiden	ent and Administrator		
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page	e (optional)		1050.00	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 23 / 56 (check only one) X
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and ad	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Mr. Donald L. Harris Moiling Address - FOZG Burnside Lending	Duite		Date of Receipt
	Mailing Address 5976 Burnside Landing	Drive		05 21 2009
	City	State	Zip Code	Transaction ID: 17220152
	Burke	VA	22015-2522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Inova Health System	Occupation Vice Pre	on sident, Government Relations	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) Ms. Grace Hines			Date of Receipt
	Mailing Address 170 Spoon Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Zip Code			Transaction ID: 17220155
	Yorktown	VA	23693-5591	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Sentara Healthcare	Occupation Vice Pre		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
С.	Full Name (Last, First, Middle Initial) Ms. Sylvia Richendollar			Date of Receipt
	Mailing Address 5466 Hunt Club Drive			05 21 2009
	City	State	Zip Code	Transaction ID: 17220626
	Virginia Beach	VA	23462-3413	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Sentara Norfolk General Hospital	Occupation Director	n Laboratory Services	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	
	SUBTOTAL of Receipts This Page (optional)		·····	1000.00
Γ	<u> </u>		·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 56 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms Joan Roscoe Mailing Address P O Box 3340 City Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Medical Center Receipt For: Primary General	State Zip Code VA 22604-1334 C Occupation Chief Information Officer Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr Reuven Pasternak, , M.D. Mailing Address 3300 Gallows Road City Falls Church FEC ID number of contributing federal political committee. Name of Employer Inova Fairfax Hospital Receipt For:	State Zip Code VA 22042-3307 C Occupation Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms Toni R Ardabell, , R.N. Mailing Address 3300 Gallows Road City Falls Church FEC ID number of contributing federal political committee.	350.00 State Zip Code VA 22042-3307 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Inova Fairfax Hospital Receipt For: Primary Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	Occupation Chief Operating Officer Aggregate Year-to-Date 350.00	900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 56 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any per- the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David L Bernd Mailing Address 6015 Poplar Hall D	rive	Date of Receipt
City Norfolk FEC ID number of contributing	State Zip Code VA 23502-3819	Transaction ID: 17220676 Amount of Each Receipt this Period 350.00
Receipt For: Primary Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) William Blanton Mailing Address 4309 Blackthrone C	Ct Ct	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17220677
Virginia Beach FEC ID number of contributing federal political committee.	VA 23455-4549	Amount of Each Receipt this Period 350.00
Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼	Occupation VP for Underwriting & Actuarial Ser Aggregate Year-to-Date 350.00	vic
Full Name (Last, First, Middle Initial) Mr. Michael Dudley Mailing Address 4417 Corporation L	200	Date of Receipt
		05 22 2009
City Virginia Beach	State Zip Code VA 23462-3162	Transaction ID: 17220682 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer Sentara Healthcare	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	·	1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pers ne name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph Rapoza, Jr Mailing Address 5107 Waterford Place	е	Date of Receipt 0 5 2 2 2 0 0 9
City	State Zip Code VA 23435-3528	Transaction ID: 17220692
Suffolk FEC ID number of contributing federal political committee.	VA 23435-3528	Amount of Each Receipt this Period 350.00
Name of Employer Maryview Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Judie S. Snipes Mailing Address 77 Gloucester Court		Date of Receipt 0 5 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17220694
Troutville FEC ID number of contributing federal political committee.	VA 24175-6625	Amount of Each Receipt this Period 350.00
Name of Employer Carilion Clinic	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Cynda Tipple		Date of Receipt
Mailing Address 973 N. Potomac Stre	et	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17220698
Arlington FEC ID number of contributing federal political committee.	VA 22205-1649	Amount of Each Receipt this Period 350.00
Name of Employer Prince William Hospital	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16
r for commercial purposes, other than using th	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. H. Patrick Walters		Date of Receipt
Mailing Address 8323 Private Line		05 22 7 2009
City Annandale	State Zip Code VA 22304-1594	Transaction ID: 17220700 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 22504 1554	350.00
Name of Employer Inova Health System	Occupation Vice President, Administration	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia R. Goldman		Date of Receipt
Mailing Address 9 Farm Haven Court		05 27 2009
City	State Zip Code	Transaction ID: 17220701
Rockville	MD 20852-4231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Aline M. Holmes		Date of Receipt
Mailing Address 19 Ashford Drive		05 22 2009
City Plainsboro	State Zip Code NJ 08536-3632	Transaction ID: 17220858
FEC ID number of contributing federal political committee.	C 08536-3632	Amount of Each Receipt this Period 500.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Senior VP, Clinical Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1350.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 56 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs			Date of Receipt
Mailing Address 23 E. Delaware Ave	enue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pennington	State NJ	Zip Code 08534-2302	Transaction ID: 17220864 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00004-2002	255.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General	Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Dennis D Keefe			Date of Receipt
Mailing Address 35 Warthin Circle			05 29 2009
City	State MA	Zip Code	Transaction ID: 17222769
Norwood FEC ID number of contributing federal political committee.	C	02062-5667	Amount of Each Receipt this Period 350.00
Name of Employer Cambridge Health Alliance	Occupation	n ecutive Officer	
Receipt For: Primary General Other (specify)	- 	e Year-to-Date ▼ 350.00	1
Full Name (Last, First, Middle Initial)			-
Ms. Marjorie Swetonic Mailing Address 3104 Faiss Dr.			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Las Vegas	State NV	Zip Code 89134-7432	Transaction ID: 17222794 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03134-7432	350.00
Name of Employer MountainView Hospital	Occupation Vice Cha		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		955.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 56 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAG	C	
Full Name (Last, First, Middle Initial) Mr. Jim H Skogsbergh		Date of Receipt
Mailing Address 2025 Windsor Drive	е	05 29 2009
City	State Zip Code	Transaction ID: 17222799
Oak Brook	IL 60523-1586	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Advocate Health Care	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Robert G Norton, , CHE	I	Date of Receipt
Mailing Address 81 Highland Avenue	е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17222951
<u>Salem</u>	MA 01970-2768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer North Shore Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Ellen Zane, , CHE		Date of Receipt
Mailing Address 750 Washington St	treet	05 29 2009
City	State Zip Code	Transaction ID: 17222957
Boston	MA 02111-1845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Tufts Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	al)	2350.00

ITEMIZED F		atamanta ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 56 (check only one) X 11a
or for commercial NAME OF CC	purposes, other than using the r MMITTEE (In Full) ospital Association PAC	name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	st, First, Middle Initial)			Date of Receipt
Mailing Addres	s 325 Seventh Street, NW Suite 700	V		05 31 Y Y Y Y Y
City <u>Washington</u>		State DC	Zip Code 20004-2818	Transaction ID: PR1045726222462 Amount of Each Receipt this Period
FEC ID numbe federal politica	er of contributing I committee.	C		78.00
Name of Empl American Hos tion-Washingt Receipt For: Primary Other (s	oyer pital Associa- General pecify)		n ice President & General Con Year-to-Date ▼ 390.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (La: Mr. Stephen Ma Mailing Addres	•	eet		Date of Receipt 05 31 2009
City	Oute 62 165	State IL	Zip Code	Transaction ID: PR1302378922462
Chicago FEC ID number federal politica	er of contributing I committee.	C	60606	Amount of Each Receipt this Period 86.96
Name of Empl American Hos tion-Chicago Receipt For: Primary Other (s	oyer pital Associa- General pecify)		n ice President e Year-to-Date ▼	P/R Deduction (\$43.48 Bi-Weekly)
Full Name (La Mr. James Wad Mailing Addres				Date of Receipt 0 5 3 1 2 0 0 9
City		State	Zip Code	Transaction ID: PR1347703422462
Chicago FEC ID number federal politica	er of contributing I committee.	C	60606-3436	Amount of Each Receipt this Period 40.00
Name of Empl American Hos tion-Chicago Receipt For: Primary Other (s	oyer pital Associa- General pecify)	-	n sident Account Services e Year-to-Date ▼ 850.00	P/R Deduction (\$20.00 Bi-Weekly)
SUBTOTAL of F	Receipts This Page (optional)			204.96

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sch for each category Detailed Summan	of the control of the
0	ny information copied from such Reports and r for commercial purposes, other than using the	statements may not be sold or used a name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin		05 / 31 / 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347708422462 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director, ASHHI Aggregate Year-to-Date	RA
	Primary General Other (specify) ▼		P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	05 31 YYYY 2009
	City	State Zip Code	Transaction ID: PR1384065322462
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federa	al Relations
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	05 / 31 / Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327629122462
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Vice President, Pul	olic Policy
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional).	1	234.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 56 (check only one) X
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
. ∠ 	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner			Date of Receipt
	Mailing Address 11004 Petersborough	Drive		05 31 2009
	City	State	Zip Code	Transaction ID: PR327745922462
	Rockville	MD	20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Gra	assroots Advocacy	
	Receipt For:	Aggregate Yea		
	Primary General Other (specify) ▼	0 0 0	390.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W		05 31 7 2009
	City	State	Zip Code	Transaction ID: PR327812022462
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Execut	ive Officer, AONE	
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W		05 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327858022462
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	, '	nt, Political Affairs	
	Receipt For: Primary General	Aggregate Yea	ar-to-Date ▼	D/D Dadwatian (600 00 D)
	Other (specify)		390.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		234.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 33 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold name and address of any	or used by any persor political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. John F. Barry			Date of Receipt
	Mailing Address One North Franklin	01-1- 7'- 0		0 5 3 1 2 0 0 9
	City Millis	State Zip Coo MA 60606-		Transaction ID: PR327877822462 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	3430	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	390.00	P/R Deduction (\$39.00 Bi- Weekly)
_ s.	Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700			05 31 7 9 9
	City	State Zip Coo		Transaction ID: PR328132822462
	Washington	DC 20004-	-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President and Chie		_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Dat	390.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
	Mailing Address 204 7th Ave			05 31 7 2009
	City La Grange	State Zip Coo		Transaction ID: PR328136922462
	FEC ID number of contributing federal political committee.	IL 60525-	-0400	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President,		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	390.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			234.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 56 (check only one) X 11a
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>_</u>	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		05 31 7 2009
	City Chicago	State Zip Code IL 60640-1318	Transaction ID: PR328223822462 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	390.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.	<u> </u>	Date of Receipt
	Mailing Address 13106 Vingle Lane		05 31 YYYYY 2009
	City	State Zip Code	Transaction ID: PR328224922462
	Silver Spring	MD 20906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Senior Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	390.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack	<u> </u>	Date of Receipt
	Mailing Address 3475 North Venice Str	eet	05 31 2009
	City	State Zip Code	Transaction ID: PR328260922462
	Arlington	VA 22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Bi-
	Other (specify)	390.00	Weekly)
Г	CURTOTAL of Descipts This Dags (entired)		234.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 56 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		aroo or ary pointed committee to	y solicit contributions from each committee.
Full Name (Last, First, Middle Initial) Mr. Richard H. Wade			Date of Receipt
Mailing Address 1221 Cavalier Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State MD	Zip Code	Transaction ID: PR328310422462
Arnold FEC ID number of contributing federal political committee.	C	21012-2126	Amount of Each Receipt this Period 78.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General		ice President Strategic Com e Year-to-Date ▼	mun P/R Deduction (\$39.00 Bi-
Other (specify) ▼	0 0	390.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
Mailing Address 325 Seventh Street, Suite 700			05 31 2009
City <u>Washington</u>	State DC	Zip Code 20004-2818	Transaction ID: PR328341822462 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		78.00
Name of Employer American Hospital Associa- tion-Washingt		Political Action & Grassroot	1
Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 390.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
Mailing Address 200 Clover Hill Cour	t		05 31 YYYYY 2009
City Yardley	State PA	Zip Code 19067-5736	Transaction ID: PR328511822462 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10007 0700	78.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For:	, '	Executive	
Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 390.00	P/R Deduction (\$39.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)	<u> </u>		234.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 11
7	Any information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American Hospital Association PAC		for the purpose of soliciting contributions solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)		T
Α.	Mr. Anthony J. Burke		Date of Receipt
	Mailing Address One North Franklin Av	е.	05 31 2009
	City	State Zip Code	Transaction ID: PR328913322462
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	88.00
	Name of Employer American Hospital Associa- tion	Occupation President & CEO, AHA Solutions, Inc.	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	308.00	P/R Deduction (\$44.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR329071322462
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Officer, C	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	390.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
-	Mailing Address 500 Interstate Boulevard South		05 31 2009
	City	State Zip Code	Transaction ID: PR329215722462
	Nashville	TN 37210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	390.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ			244.00

SCHEDULE A (FEC Form 3X)

ľ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS any information copied from such Reports and S	for each Detailed	parate schedule(s) a category of the I Summary Page	FOR LINE NUMBER: PAGE 37 / 56 (check only one) X
	NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and address of any	y political committee to s	solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca			Date of Receipt
	Mailing Address 4960 138th Cricle Wes	t		05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Apple Valley	State Zip Co	ode 1-9229	Transaction ID: PR330475422462 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	1 1 1	78.00
	Name of Employer American Hospital Association-Chicago Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Regional Executive Aggregate Year-to-Da		P/R Deduction (\$39.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe Mailing Address 172 Atteridge			Date of Receipt 0 5 3 1 2 0 0 9
	City	State Zip Co	ode	Transaction ID: PR330549222462
	Lake Forest	IL 60045	5-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		94.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Co Aggregate Year-to-Da	onstituency Section ate ▼	P/R Deduction (\$47.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.			Date of Receipt
	Mailing Address PO Box 15587			05 31 2009
	City	State Zip Co		Transaction ID: PR331416022462
	Austin FEC ID number of contributing federal political committee.	TX 78761	1-5587	Amount of Each Receipt this Period 116.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	580.00	P/R Deduction (\$58.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			288.00

В.

SCHEDULE A (FEC Form 3X)

PAGE 38 / 56 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Date of Receipt Mr. Donald May Mailing Address 521 Great Falls St. 05 3 1 2009 Zip Code City State Transaction ID: PR331533222462 Falls Church VA 22046-2613 Amount of Each Receipt this Period FEC ID number of contributing 78.00 C federal political committee. Name of Employer American Hospital Associa-tion-Washingt Occupation Vice President, Policy Receipt For: Aggregate Year-to-Date General Primary P/R Deduction (\$39.00 Bi-390.00 Other (specify) Weekly) Full Name (Last, First, Middle Initial) Ms. Kristin Welsh Date of Receipt Mailing Address 325 Seventh Street, NW 0 5 3 1 2009 Suite 700 City Transaction ID: PR517619722462 State Zip Code Washington DC 20004-2818 Amount of Each Receipt this Period FEC ID number of contributing C 78.00 federal political committee. Name of Employer American Hospital Associa-Occupation Vice President Executive Branch Relati tion-Washingt Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$39.00 Bi-

390.00

Weekly)

SUBTOTAL of Receipts This Page (optional)	•	156.00
TOTAL This Period (last page this line number only)	•	30992.96

Other (specify)

SCHEDULE A (FEC Form 3)	X)		FOR LINE NUMBER: PAGE 39 / 56
ITEMIZED RECEIPTS	/	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 X 16 17
Any information copied from such Reports a or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full)			
American Hospital Association PA	С		
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal			Date of Receipt
Mailing Address Post Office Box 86	00		05 28 2009
City	State	Zip Code	Transaction ID: 17239997
<u>Harrisburg</u>	PA	17105-8600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C coo	128082	20000.00
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 40000.00	

SUBTOTAL of Receipts This Page (optional)	•	20000.00
TOTAL This Period (last page this line number only)	•	20000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 56 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
Mailing Address 1400 G Street, NW			05 29 2009
City	State	Zip Code	Transaction ID: 17263770
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		182.23
Name of Employer	Occupation	ו	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1679.97	Interest

SUBTOTAL of Receipts This Page (optional)	•	182.23
TOTAL This Period (last page this line number only)	•	182.23

CHEDULE B (FEC Form 3X)		arate schedule(s)		FOR LIN		ER:			PAGE	41/	56
FEMIZED DISBURSEMENTS		category of the Summary Page		21b 27	22 28a	<u> </u>	23 28b	П	24 28c	25 29	F
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<u>/</u>	Full Name (Last, First, Middle Initial) Citizens For Turner					Date o	of Disb	urser				
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or	or commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	, , , , , , , , , , , , , , , , , , ,	cal committee to s	olicit contributions from such committee
	Full Name (Last, First, Middle Initial) Berman For Congress Mailing Address 6380 Wilshire Blv	/d. #1612		Transaction ID: 17267377 Date of Disbursement O 5 M / D 2 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Los Angeles Purpose of Disbursement Void of 4/09 check Candidate Name Rep. Howard L. Berman	State Zip Code CA 90048	011 Category/ Type	Amount of Each Disbursement this Period -1000.00
	Office Sought: X House Senate President State: CA District: 28	Disbursement For: 2010 X Primary General Other (specify)	al	Void of 4/09 check

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)) FOR LINE (check only	NUMBER: PAGE 55 / 56
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President	Other (specify)		
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President	Other (specify) ▼		
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City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
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	ement For:	•	Merchant Fees
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SCHEDULE B (FEC Form 3X)

President

District:

FOR LINE NUMBER: PAGE 56/56 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Transaction ID: 17263768 Merchant Bankcard Date of Disbursement 05 0 5 2009 Mailing Address 1601 Elm Street City State Zip Code Amount of Each Disbursement this Period Dallas TX 75201 310.15 Purpose of Disbursement Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Merchant Fees General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 17263769 Citibank, F.S.B. Date of Disbursement 19 0 5 2009 Mailing Address 1400 G Street, NW City State Zip Code Amount of Each Disbursement this Period 20005 Washington DC 35.20 Purpose of Disbursement Bank Fee 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Bank Fee Senate Primary General

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Other (specify)

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